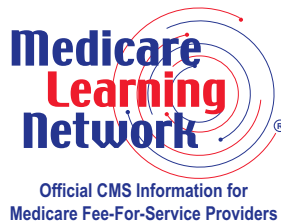


DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



The Basics of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Accreditation

FACT SHEET

In order to supply Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS), suppliers must meet DMEPOS Quality Standards established by the Centers for Medicare & Medicaid Services (CMS) and be accredited by a CMS-approved independent national Accreditation Organization (AO). This fact sheet provides information on the accreditation requirement, including the types of providers who are exempted and the process for becoming accredited.

Overview of the Quality Standards and Accreditation Requirement

CMS established and implemented DMEPOS Quality Standards for suppliers of DMEPOS under the Medicare Modernization Act of 2003 (MMA). In order to enroll or maintain Medicare billing privileges, all DMEPOS suppliers (unless exempted as described below) must comply with the DMEPOS Quality Standards to become accredited. Visit the DMEPOS Quality Standards at http://www.cms.gov/MedicareProviderSupEnroll/07_DMEPOS Accreditation.asp on the CMS website.

The accreditation requirement applies to suppliers of the following items and services:

- Durable Medical Equipment (DME);
- Medical supplies;
- Home dialysis supplies and equipment;
- Therapeutic shoes;
- Parenteral and enteral nutrients, equipment, and supplies;
- Electromyogram devices;
- Salivation devices;
- Blood products;
- Transfusion medicine; and
- Prosthetic devices, prosthetics, and orthotics.

The items and services in the list above do not include:

- Medical supplies furnished by Home Health Agencies (HHAs);
- Drugs used with DME (inhalation drugs and drugs infused with a DME pump); and
- Other Part B drugs, such as immunosuppressive drugs and anti-emetic drugs.

Providers Exempted from the Accreditation Requirement

The Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) exempts certain eligible professionals and other persons (defined below) from the accreditation requirement, unless CMS determines that the quality standards are specifically designed to apply to such professionals and persons. Additionally, providers accredited prior to the enactment of MIPPA, on July 15, 2008, will not have to undergo a re-accreditation process.

The exempted eligible professionals include the following practitioners:

- Physicians,
- Physical Therapists,
- Occupational Therapists,
- Qualified Speech-Language Pathologists,
- Physician Assistants,
- Nurse Practitioners,
- Clinical Nurse Specialists,
- Certified Registered Nurse Anesthetists,
- Certified Nurse-Midwives,
- Clinical Social Workers,
- Clinical Psychologists,
- Registered Dietitians, and
- Nutritional Professionals.

Additionally, MIPPA exempts “other persons” from the accreditation requirement, unless CMS determines that the quality standards are specifically designed to apply to such “other persons.” At this time, such “other persons” are limited to the following practitioners:

- Orthotists,
- Prosthetists,
- Opticians, and
- Audiologists.

MIPPA allows CMS to exempt such professionals and other persons from the DMEPOS Quality Standards based on their licensing, accreditation, or other applicable mandatory quality requirements. At the present, CMS is not exercising this statutory authority.

Accreditation Process

DMEPOS suppliers, except for those exempted eligible professionals and other persons listed above, must be accredited **prior** to submitting a Medicare enrollment application to the National Supplier Clearinghouse (NSC). The NSC will not approve any DMEPOS supplier’s enrollment application if the enrollment package does not contain an approved accreditation upon receipt or in response to a development request. The NSC shall reject the enrollment application unless the DMEPOS supplier provides supporting documentation that demonstrates that the supplier has an approved accreditation.

There are 10 AOs deemed to accredit DMEPOS suppliers using CMS’ DMEPOS Quality Standards. Refer to the list of AOs at http://www.cms.gov/Medicare/ProviderSupEnroll/07_DMEPOS/Accreditation.asp on the CMS website.

The accreditation process includes the pre-application, the application review, and the on-site survey. The accreditation process may take up to 9 months to complete for a supplier that submits a complete accreditation application to the AOs and has no deficiencies to correct following an on-site survey.

The **pre-application** consists of the following:

- The supplier contacts the AOs and obtains information about each organization's accreditation process;
- The supplier reviews the information and chooses the organization to which it will apply;
- The AO assists the supplier to determine what changes will be required to meet the accreditation standards (modifying existing services and practices; developing appropriate policies and procedures; developing an implementation plan and timeline; and training employees); and
- The supplier applies for accreditation after the changes are in place or during implementation.

The **application review** consists of the following:

- The supplier submits a completed application to the AO with all the supporting documentation; and
- The AO reviews the application and documentation (verifies licensures, organizational chart, etc.). The average review period is 3 to 6 months.

The **on-site survey** consists of the following:

- The AO conducts an unannounced on-site survey; and
- The AO determines whether to accredit the supplier based on the submitted data and the results of the on-site survey.

The unannounced on-site survey will be performed at least every 3 years. Accreditation cannot be transferred upon merger, acquisition, or sale. CMS, the NSC, and the AO must be notified.

Resources

For more information about DMEPOS accreditation requirements, along with a list of the AOs, visit http://www.cms.gov/MedicareProviderSupEnroll/07_DMEPOS_Accreditation.asp on the CMS website.

For more information on the DMEPOS Quality Standards, refer to the "Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Quality Standards" booklet (ICN 905709) at www.cms.gov/MLNProducts/downloads/DMEPOS_Qual_Stand_Booklet_ICN905709.pdf or visit http://www.cms.gov/MedicareProviderSupEnroll/07_DMEPOS_Accreditation.asp on the CMS website.

To contact the NSC, call 1-866-238-9652 or visit <http://palmettogba.com/nsc> on the Internet.

The accreditation policy applies differently to pharmacies. For more information, refer to the "Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) New Information for Pharmacies" fact sheet (ICN 905711) at www.cms.gov/MLNProducts/downloads/DMEPOS_Pharm_FactSheet_ICN905711.pdf on the CMS website.



This fact sheet was current at the time it was published or uploaded onto the web. Medicare policy changes frequently so links to the source documents have been provided within the document for your reference.

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